

**BEST AVAILABLE COPY**

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	914		12/7/99
O.I.P.E. CLASSIFIER	000	68971	12/15/99
FORMALITY REVIEW			12/27/99

**INDEX OF CLAIMS**

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	12/22/99
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48	✓	✓	
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50		✓	

Claim	Final	Original	Date
51	✓	✓	
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62	✓		
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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